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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

OMB Number: 3235-0076

Estimated average burden hours per response . . . 16.00



UNIFORM LIMITED OFFERING EXEMPTION Name of Offering ( check if this is an amendment and name has changed, and indicate change.) REF Partners, LP-Offering of Limited Partnership Interests Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 Section 4(6) Type of Filing: □ New Filing ⊠□ Amendment A. DASIGID ENFIRICATION DATA 1. Enter the information requested about the issuer Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) **REF Partners, LP** THOMSON Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (IPPAIDE OLA Code) Cira Centre, 2929 Arch Street, Suite Philadelphia, PA 19104 267-295-2291-650 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Invest in and hold for an indefinite period of time, units in Renaissance Institutional Equities Fund, LLC ("Rief Fund") and may also hold funds in certain other investments Type of Business Organization corporation limited partnership, already formed □other-- limited liability company, formed: business trust limited partnership, to be formed Year Month 7 Actual or Estimated Date of Incorporation or Organization: 0 0 5 □ Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Sevice abbreviation for State: CN for Canada; FN for other foreign jurisdiction) D E **GENERAL INSTRUCTIONS** 

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

THE REPORT OF THE PARTY OF THE	
2. Enter the information requested for the following:	
<ul> <li>Each promotor of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equipment;</li> </ul>	uity securities of the
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issue	ers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General Partner
Full Name (Last name first, if individual)	
myCIO Wealth Partners, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Cira Centre, 2929 Arch Street, Suite 650, Philadelphia, PA 19104	
Check Box(es) that Apply:	Manager of GP
Full Name (Last name first, if individual)	
Lees, David	
Business or Residence Address (Number and Street, City, State, Zip Code)	
658 Shellbark Lane, Rosemont, PA 19010	
Check Box(es) that Apply: General and/or	Manager of GP
Full Name (Last name first, if individual)	
Biles, James	
Business or Residence Address (Number and Street, City, State, Zip Code)	
127 Catharine Street #9, Philadelphia, PA 19147	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or	Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

B. INFORMATION ABOUT OFFERING		
		No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		×
Answer also in Appendix, Column 2, if filing under ULOE.		
	\$ 250,00	
		No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last Name first. if individual)		
The limited partnership interests are being offered and sold by the General Partner of the Partnership. Compensation or commission be paid in connection with the offer or sale of the limited partnership interests.  Business or Residence Address (Number and Street, City, State, Zip Code)	ions will	l not
Name of Associated Broker or Dealer		
Control Will Develop Line III. C. P. to II. C. P. to II.		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	<b>—</b>	
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Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
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[ IL ] [ IN ] [ IA ] [ KS ] [ KY ] [ LA ] [ ME ] [ MD ] [ MA ] [ MI ] [ MN ] [ MS ] [ MT ] [ NE ] [ NV ] [ NH ] [ NJ ] [ NM ] [ NY ] [ NC ] [ ND ] [ OH ] [ OK ] [ OR ] [ RI ] [ SC ] [ SD ] [ TN ] [ TX ] [ UT ] [ VT ] [ VA ] [ WA ] [ WV ] [ WI ] [ WY ] [ Full Name (Last Name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	MO] PA] PR]	tates
[ IL ] [ IN ] [ IA ] [ KS ] [ KY ] [ LA ] [ ME ] [ MD ] [ MA ] [ MI ] [ MN ] [ MS ] [ MT ] [ NE ] [ NV ] [ NH ] [ NJ ] [ NM ] [ NY ] [ NC ] [ ND ] [ OH ] [ OK ] [ OR ] [ RI ] [ SC ] [ SD ] [ TN ] [ TX ] [ UT ] [ VT ] [ VA ] [ WA ] [ WV ] [ WI ] [ WY ] [ Full Name (Last Name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	MO] PA] PR]	tates
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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity	_		\$	0
	☐ Common ☐ Preferred	_	<del>-</del>	Ť-	
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests – aggregate amount of offering is unlimited	_		<b>\$ 1</b>	89,789,250****
	Other -	_		\$	0
	Total		*	· -	89,789,250****
	Answer also in Appendix, Column 3, if filing under ULOE.	•-		* <u>-</u>	03,703,200
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggragata
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		97	\$ <u>1</u>	89,789,250****
	Non-accredited Investors		0	\$_	0
	Total (for filings under Rule 504 only)		97	\$ <b>1</b>	89,789,250****
	Answer also in Appendix, Column 4, if filing under ULOE.			_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		0	\$	0
	Regulation A	_	0	\$_ \$	0
	Rule 504	-	0	\$- \$	0
	Total	_	0	մ– \$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_	U .	₽	<u> </u>
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees			\$	**
	Accounting Fees			\$	0
	Engineering Fees			<b>s</b>	0
	Sales Commissions (specify finders' fees separately)			¢_	0
	Other Expenses (identify)			<b>«</b>	**
	Total			Ψ-	35,000
	ne offering is unlimited and will continue until the General Partner desires to terminate he total offering proceeds including legal fees is \$35,000		<u>.</u>	<b>*_</b>	33,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXP	ENSES AND	USI	OF PROCE	EDS		
b. Enter the difference between the aggregate offe Question I and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This d	ifference is ti	he		up to	<b>⊠\$</b> *t	he offering is
					-F		limited
						\$18	9,754,250****
5. Indicate below the amount of the adjusted gross proceed	eds to the issuer used or propo	sed to be use	ed				
for each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of							
gross proceeds to the issuer set forth in response to Part		iai uie aujusi	zu -				
				Payments to			
				Officers, Directors, &		]	Payments To
				Affiliates			Others
Salaries and fees			_			<b>\$</b>	
Purchase of real estate			_		_ □	\$	0
Purchase, rental or leasing and installation of machin			_			`	0
Construction or leasing of plant buildings and facilit	ies	🗅	\$_	0	_ 🗆	\$	0
Acquisition of other businesses (including the value that may be used in exchange for the assets or securi							
merger)	ties of allouler issuer pursuant		\$	0		\$	0
Repayment of indebtedness		🗖	\$_	0		\$	0
Working capital			\$_	0		\$ 189	,754,250****
Other (specify):			\$	0		\$	0
			_	0	_ 0	\$	0
Column Totals	•••••••	X	\$_	0	×	\$ <u>189</u>	,754,250****
Total Payments Listed (column totals added)				⊠ \$ <u>18</u>	9,754,25	0****	<u></u>
****includes a capital contribution by the general partner of		i <b>m</b> agatti jakeet k		ak situadan ke situata	JATOR JOS	\$ 1.1	
The issuer has duly caused this notice to be signed by the signature constitutes an undertaking by the issuer to furni information furnished by the issuer to any non-accredited in	sh to the U.S. Securities and	Exchange C	omm	ission, upon v	ınder Ru vritten re	le 505 quest	of its staff, the
Issuer (Print or Type)	Signature			Dat	e		
REF Partners, LP	×·B			M	larch <sup>(</sup>	1,2	2007
Name of Signer (Print or Type)	Title of Signer (Print or Ty	pe)					
myCIO Wealth Partners, LLC, the	Partner/						
general partner							

## E. STATE SIGNATURE Yes No 1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?..... $\boxtimes$ See Appendix, Column, for state response. 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by law. 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

	$\wedge$	
Issuer (Print or Type)	Signature	Date
REF Partners, LP	(B)	March <sup>q</sup> , 2007
Name (Print or Type)	Title (Print of Type)	
myCIO Wealth Partners, LLC, the general partner	Partner	

v a.		NI	

1	[	2	3	<u> </u>			5			
	to non-a investor	l to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Units of Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR		·								
CA		X	***	2	\$4,055,000	0	0		x	
СО										
СТ		х	***	4	\$17,957,500	0	0		х	
DE		х	***	3	\$7,770,000	0	0		х	
DC		х	***	1	\$500,000	0	0		х	
FL		х	***	8	\$6,871,500	0	0		х	
GA		Х	***	1	\$500,000	0	0		х	
HI							<u> </u>			
1D		!					· · · · · · · · · · · · · · · · · · ·			
IL		х	***	3	\$7,250,000	0	0		х	
IN		x	***	1	\$250,000	0	0		Х	
IA			<del></del>							
KS										
KY										
LA										
ME		х	***	1	\$1,000,000	0	0		Х	
MD		х	***	2	\$5,750,000	0	0		х	
MA		х	***	1	\$250,000	0	0		X	
MI										
MN		х	***	1	\$500,000	0	0		х	
MS										
мо	Ī									
*** +bo/	offering is u	inlimited	<del></del>	•		1				

<sup>\*\*\*</sup> the offering is unlimited

<sup>\*\*\*\*</sup>total sales to date include a \$250,000 capital contribution by the general partner and contributions by Bermuda investors. 641034.1 3/9/07

Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of	ALTERNIA - ARTENDIA - ARTENDIA - ALTENDIA -										
	1	7	2	3			4				
State         Ves         No.         Units of Limitate Partnership Interests         Nameur Chrestife Investors         Amount         Non-Accredited Investors         Amount         Yes         No.           MT         I         1	·	to non-ac	ccredited s in State	and aggregate offering price offered in state	amount purchased in State				under State ULOE (if yes, attach explanation of waiver granted)		
NE         Image: color of the color o	State	Yes	No		Accredited		Number of Non-Accredited	Amount	Yes	No	
NV         Image: color of the color o	МТ										
NH         X         ****         9         \$9,750,000         0         0         X           NM         X         ****         5         \$4,000,000         0         0         X           NV         X         ****         5         \$4,000,000         0         0         X           NC         X         ****         2         \$786,000         0         0         X           ND         X         ****         1         \$250,000         0         0         X           OK         X         ****         1         \$250,000         0         0         X           OK         X         ****         45         \$94,060,150         0         0         X           OK         X         ****         45         \$94,060,150         0         0         X           SC         X         X         ****         2         \$2,000,000         0         0         X           TX         X         ****         2         \$2,000,000         0         0         X           VT         X         X         ***         2         \$900,000         0         0         X <td>NE</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	NE										
NJ         X         ****         9         \$9,7\$0,000         0         0         X           NM         X         ****         5         \$4,000,000         0         0         X           NC         X         ****         2         \$786,000         0         0         X           ND         X         ****         1         \$250,000         0         0         X           OR         X         ****         45         \$94,060,150         0         0         X           PA         X         ****         45         \$94,060,150         0         0         X           RI         X         ****         45         \$94,060,150         0         0         X           SC         X         X         ****         45         \$94,060,150         0         0         X           SD         X         X         X         X         X         X         X         X           TX         X         X         X         X         X         X         X         X           VT         X         X         X         X         X         X         X	NV										
NM         X         ****         5         \$4,000,000         0         0         X           NC         X         ****         2         \$786,000         0         0         X           ND         X         ****         1         \$250,000         0         0         X           OK         I         I         \$250,000         0         0         X           OR         I         I         \$1         <	NH		·								
NY         X         ***         5         \$4,000,000         0         0         X           NC         X         ****         2         \$786,000         0         0         X           ND         X         ****         1         \$250,000         0         0         X           OK         I	NJ		X	***	9	\$9,750,000	0	0		х	
NC         X         ****         2         \$786,000         0         0         X           ND         X         ****         1         \$250,000         0         0         X           OK                 OR                 PA         X         ****         45         \$94,060,150         0         0         X           SC                 SC                 SD                   TN <t< td=""><td>NM</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	NM										
ND         X         ****         1         \$250,000         0         0         X           OK	NY		х	***	5	\$4,000,000	0	0		x	
OH         X         ****         1         \$250,000         0         0         X           OK         I         <	NC		х	***	2	\$786,000	0	0		х	
OK         Image: Control of the c	ND										
OR         Image: Control of the c	ОН		Х	***	1	\$250,000	0	0		х	
PA         X         ***         45         \$94,060,150         0         0         X           RI         I         I         I         I         I         I         I           SC         I	ок										
RI	OR										
SC         SD         SD<	PA		X	***	45	\$94,060,150	0	0		x	
SD         Image: Control of the c	RI										
TN	SC										
TX         X         ***         2         \$2,000,000         0         0         X           UT	SD										
UT         X         2         \$2,900,900         0         X           VT         X         ***         2         \$900,000         0         0         X           WA         X         ***         2         \$900,000         0         0         X           WV         X         <	TN										
VT	TX		X	***	2	\$2,000,000	0	0		x	
VA         X         ****         2         \$900,000         0         0         X           WA         I         <	UT										
WA	VT										
WV	VA		x	***	2	\$900,000	0	0		X	
WI	WA										
WY X *** 4 \$6,010,000 X	wv				<del></del> _						
	wı										
PR PR	WY		X	***	4	\$6,010,000		-		x	
****total galagita data include a social contribution by Communication of \$250,000 and contributions by											

\*\*\*\*total sales to date include a capital contribution by General Partner of \$250,000 and contributions by Bermuda investors